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Serial No. 10/780,595
Attorney Docket No: 160-054

CERTIFICATE OF FACSIMILE TRANSMISSION UNDER 37 C.F.R. 1.8

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October 18, 2005
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Christine M. Morrisette
Signature

Christine M. Morrisette
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Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Transmittal x 2	2 pages
Fee Sheet x 2	2 pages
Information Disclosure Statement	2 pages
Statement Under 37 CFR 1.97(e)	1 page
PTO Form 1449	1 page
Total including this sheet	<u>9 pages</u>

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Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/780,595
	Filing Date	02/18/2004
	First Named Inventor	Backes
	Group Art Unit	2665
	Examiner Name	Philpott
Total Number of Pages in This Submission	Attorney Docket Number	160-054

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Drawing(s) and Letter	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	- Statement Under 37 CFR 1.97(e)
<input checked="" type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	- Fee Sheet
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s)	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	Please charge any deficiency or credit any overpayment to Deposit Account No. 502569.
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Mary Steubing, Reg. No. 37,946 Steubing McGuinness & Manaras LLP
Signature	<i>Mary Steubing</i>
Date	10/17/05

CERTIFICATE OF MAILING OR FACSIMILE

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to Commissioner for Patents, Alexandria, VA 33212 or being facsimile transmitted to the United States Patent and Trademark Office at number (571) 273-8300 on the date below:			
Type or printed name	Christine M. Morrisette		
Signature	<i>Christine M. Morrisette</i>	Date	10-18-05

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/780,595
		Filing Date	02/18/2004
		First Named Inventor	Backes
		Group Art Unit	2665
		Examiner Name	Philpott
Total Number of Pages in This Submission		Attorney Docket Number	160-054

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) and Letter <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): - Statement Under 37 CFR 1.97(e) - Fee Sheet
Remarks: Please charge any deficiency or credit any overpayment to Deposit Account No. 502569.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Mary Steubing, Reg. No. 37,946 Steubing McGuinness & Manaras LLP
Signature	<i>Mary Steubing</i>
Date	10/17/05

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Signature	<i>Christine M. Morrisette</i>	Date	10-18-05

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PTO/SB/17 (12-04)

Approved for use through 07/31/2008. OMB 0651-0032

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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Effective on 12/8/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Serial Number 10/780,595 Filing Date 2/18/2004 First Named Inventor Backes Examiner Name Philpott Art Unit 2665 Attorney Docket No. 160-054	
<input type="checkbox"/> Applicant Claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 180.00			

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METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 502569 Deposit Account Name: Steubing McGuinness & Manaras LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments							
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.							
FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
	FILING FEES Small Entity		SEARCH FEES Small Entity		EXAMINATION FEES Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
							Small Entity
2. EXCESS CLAIM FEES Fee Description							Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							50
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200
Multiple dependent claims							360
Total Claims							Fee (\$)
- 20 or HP = 0 x = \$ 0.00							Multiple Dependent Claims
HP = highest number of total claims paid for, if greater than 20							Fee (\$)
Indep. Claims							Fee (\$)
- 3 or HP = 2 x =							Fee (\$)
HP = highest number of independent claims paid for, if greater than 3							Fee (\$)
3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)
29		- 100 = 0		/ 50 = 0 (round up to a whole number)		x \$250.00 =	\$ 0.00
4. OTHER FEE(S)							Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)							
Other: Information Disclosure Statement							\$180.00

SUBMITTED BY			
Signature	<i>Mary Steubing</i>	Registration No. 37,946 (Attorney/Agent)	Telephone 978-264-6664
Name (Print/Type)	Mary Steubing	Date	10/17/05

This collection of information is required by 37 CFR 1.138. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Backes

Serial No.: 10/780,595

Filed: 2/18/2004

Title: Program for Associating Access
Points with Stations in a Wireless
Network

Group Art Unit: 2665

Examiner: Philpott

Attorney Docket No.: 160-054

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450RECEIVED
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INFORMATION DISCLOSURE STATEMENT

Dear Sir:

This Information Disclosure Statement is submitted:

☐ under 37 CFR 1.97(b), or
(Within three months of filing national application; or date of entry of international application; or before mailing date of first office action on the merits; whichever occurs last)

☐ under 37 CFR 1.97(c) together with either a:
☐ Statement under 37 CFR 1.97(e), or
☐ a \$180.00 fee under 37 CFR 1.17(p), or
(After the CFR 1.97(b) time period, but before final action or notice of allowance, whichever occurs first)

☒ under 37 CFR 1.97(d) together with a:
☒ Statement under 37 CFR 1.97(e), and
☒ a \$180.00 fee set forth in 37 CFR 1.17(p).
(Filed after final action or notice of allowance, whichever occurs first, but before payment of the issue fee)

10/19/2005 TL0111 00000000 502569 10780595

01 FC:1806 180.00 DA

☒ Applicant(s) submit herewith Form PTO 1449-Information Disclosure Citation together with copies, of patents, publications or other information of which applicant(s) are aware, which applicant(s) believe(s) may be material to the examination of this application and for which there may be a duty to disclose in accordance with 37 CFR 1.56.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Backes

Serial No.: 10/780,595

Filing Date: 2/18/2004

Title: Program for Associating Access Points
with Stations in A Wireless Network

Attorney Docket No.: 160-054

Examiner: Philpott

Group Art Unit: 2665

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OCT 18 2005

COMMISSIONER FOR PATENTS

P.O. Box 1450

Alexandria, VA 22313-1450

STATEMENT UNDER 37 CFR 1.97(e)

Sir:

The undersigned hereby certifies that either:

- () Each item of information contained in the Information Disclosure Statement was cited in a communication from a foreign patent office in a counterpart foreign application, not more than three months prior to the filing of the statement, or
- (X) No item of information contained in the Information Disclosure Statement
- was cited in a communication from a foreign patent office in a counterpart foreign application, and
 - to the knowledge of the undersigned, after making reasonable inquiry, was known to an individual designated in 37 CFR 1.56 (c) more than three months prior to the filing of the Information Disclosure Statement.

Respectfully Submitted,


Backes

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Date of Deposit:

Typed Name: Christine M. Morrissette

Signature: 

By 
Mary Steubing
Attorney/Agent for Applicant(s)
Reg. No.: 37,946

Date:

Telephone No.: 978-264-6664

The relevance of the attached references is that this is the closest art of which Applicant is aware. Applicant submits that the above references taken alone or in combination neither anticipate nor render obvious the present invention. Consideration of the foregoing in relation to this application is respectfully requested.

It is requested that the information disclosed herein be made of record in this application.

Respectfully submitted,

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Date of Deposit: 10-18-05

Typed Name: Christine M. Morrisette

Signature: Christine M. Morrisette

Mary Steubing
Mary Steubing
Attorney/Agent for Applicant(s)
Reg. No. 37,946

Date: 10/17/05

Telephone No.: 978-264-6664

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Substitute for form 1449A/PTO				Complete if Known Application Number 10780,595 Filing Date 02/18/2004 First Named Inventor Backes Art Unit 2885 Examiner Name Philpott Attorney Docket Number 180-054	
INFORMATION DISCLOSURE STATEMENT BY APPLICANT <i>(use as many sheets as necessary)</i>					
Sheet	1	of	1		

[illegible][illegible]

Examiner Signature		Date Considered	
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